

Best Available Copy

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-876)

SERIAL NO. 091 575 864	FILING DATE 5-18-00
APPLICANT(S)	

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2		1				
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OTAL IND.	3					
OTAL DEP.	5					
OTAL CLAIMS	8					

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IND.	DEP.	IND.	DEP.
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TOTAL CLAIMS			